

# FIRST COMMUNION SACRAMENTAL INFORMATION FOR PARISH RECORDS & CERTIFICATES

*(Please type or print clearly)*

CHILD'S FULL NAME \_\_\_\_\_  
(NO initials please) Last First Middle

ADDRESS \_\_\_\_\_

\_\_\_\_\_ City State Zip Code

PHONE NUMBER(S) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CITY/STATE \_\_\_\_\_

LEGAL PARENT/GUARDIAN'S NAME(S)

\_\_\_\_\_ Full Name (before Marriage, if applicable) No initials please

\_\_\_\_\_ Full Name (before Marriage, if applicable) No initials please

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**Please fill out the following and attach a current copy of your child's baptismal certificate, even if s/he was baptized at OLG**

WHERE WAS YOUR CHILD BAPTIZED?

CHURCH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

DATE OF BAPTISM: \_\_\_\_\_

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## **(FOR OFFICE USE ONLY)**

Sacrament preparing for: First Communion

Date of receiving the sacraments: \_\_\_\_\_ Celebrant: \_\_\_\_\_

Certificate prepared \_\_\_\_\_ Recorded in First Communion Book \_\_\_\_\_

PDS \_\_\_\_\_ Church of baptism notified/recorded? \_\_\_\_\_